

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

ADDRESS (number and street) ▼

211 S. Fifth Street

☐ Check if different than previously reported. (ACC)

Columbus

OH

43215

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00162339

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☐ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☒ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Chairman Ranae Lentz

Signature of Treasurer

Chairman Ranae Lentz

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Report Covering the Period: From: M M / D D / Y Y Y Y Y 11 / 25 / 2014 To: M M / D D / Y Y Y Y Y 12 / 31 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y</span> 2014		<span style="border: 1px solid black; padding: 2px;">134133.88</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">29120.42</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">268631.04</span>	<span style="border: 1px solid black; padding: 2px;">5823951.61</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">297751.46</span>	<span style="border: 1px solid black; padding: 2px;">5958085.49</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">230424.42</span>	<span style="border: 1px solid black; padding: 2px;">5890758.45</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">67327.04</span>	<span style="border: 1px solid black; padding: 2px;">67327.04</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">238382.03</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	5	/	2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	13050.00	392833.47
(ii) Unitemized .....	5470.00	241917.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)..... ▶	18520.00	634750.76
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	300.00	120050.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) ..... ▶	18820.00	754800.76
12. Transfers From Affiliated/Other Party Committees.....	57474.11	2927493.39
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	18983.39	298872.60
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	173353.54	1774959.47
(b) Levin Funds (from Schedule H5) .....	0.00	67825.39
(c) Total Transfers (add 18(a) and 18(b))..	173353.54	1842784.86
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) ..... ▶	268631.04	5823951.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19) ..... ▶	95277.50	3981166.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	20167.57	346313.11
(ii) Non-Federal Share.....	114122.81	1960056.92
(b) Other Federal Operating Expenditures .....	57378.18	499162.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	191668.56	2805532.32
22. Transfers to Affiliated/Other Party Committees.....	0.00	325000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	2600.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	169166.46
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	200.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	2000.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	2200.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	12027.06
(ii) "Levin" Share.....	0.00	68153.34
(b) Federal Election Activity Paid Entirely With Federal Funds .....	38755.86	2506079.27
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	38755.86	2586259.67
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	230424.42	5890758.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	116301.61	3862548.19

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18820.00	754800.76
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	2200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18820.00	752600.76
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	77545.75	845475.40
37. Offsets to Operating Expenditures (from Line 15, page 3).....	18983.39	298872.60
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	58562.36	546602.80

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +19A-N5HCB  
.

Form/Schedule: F3XA

Transaction ID :

In response to the RFAI issued 3/17/15, all employees who were paid on line 21A spend less than 25% of their time on federal election activity. All fringe benefits paid for employees and listed on line 21A was for employees who spent less than 25% of their time on federal election activity. The Senate Battleground dispersement has been itemized and added as a joint fundraising representative.

Form/Schedule:

Transaction ID:

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MR. WILLIAM ANTONOPLOS**

Mailing Address 75 E GAY ST SUITE 200

City	State	Zip Code
COLUMBUS	OH	43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CAPTIOL SQUARE CONSULTANTS

Occupation

LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : SA11AI.272652

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. JAMES BAKER**

Mailing Address 50 W BROAD ST STE 1985

City	State	Zip Code
COLUMBUS	OH	43215-5987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JHB ENTERPRISE

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	01	/	2014

Transaction ID : SA11AI.272657

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. JAMES BAKER**

Mailing Address 50 W BROAD ST STE 1985

City	State	Zip Code
COLUMBUS	OH	43215-5987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JHB ENTERPRISE

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	08	/	2014

Transaction ID : SA11AI.272658

Amount of Each Receipt this Period

100.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. MR. JAMES BAKER**

Mailing Address 50 W BROAD ST STE 1985

City State Zip Code  
 COLUMBUS OH 43215-5987

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JHB ENTERPRISE

Occupation

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 15 2014

Transaction ID : SA11AI.272659

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. Ms. Lyn Bliss**

Mailing Address 1224 Parkway Dr

City State Zip Code  
 Greenville OH 45331-2651

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 26 2014

Transaction ID : SA11AI.272663

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. Sarah Brown**

Mailing Address 1200 Fernwood Blvd

City State Zip Code  
 Alliance OH 44601-3767

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Homemaker

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 26 2014

Transaction ID : SA11AI.272668

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1100.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Diane Carnes**

Mailing Address 2 Turnberry Ln

City State Zip Code  
 Chillicothe OH 45601-1100

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Carnes Realty, Inc.

Occupation

Broker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

11 / 26 / 2014

Transaction ID : SA11AI.272671

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. MR. WILLIS CONNER**

Mailing Address C/O AMERCIAN CONSULTING, INC.  
 7260 SHADELAND STATION

City State Zip Code  
 INDIANAPOLIS IN 46256

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AMERICAN CONSULTING, INC.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2100.00

Date of Receipt

12 / 08 / 2014

Transaction ID : SA11AI.272674

Amount of Each Receipt this Period

1100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Gerald Conway**

Mailing Address 7140 Harris Farm Dr

City State Zip Code  
 Chagrin Falls OH 44023-1145

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FASTENERS FOR RETAIL INC.

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

12 / 01 / 2014

Transaction ID : SA11AI.272675

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1800.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. DAVID COREY**

Mailing Address 3757 INDIANOLA AVE

City State Zip Code  
 COLUMBUS OH 43214-3753

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PACA, INC.

Occupation

LOBBYIST

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 02 / 2014

**Transaction ID : SA11AI.272676**

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **B. Mr. Timothy Cosgrove**

Mailing Address 10626 Rocking Horse Trl

City State Zip Code  
 Kirtland OH 44094-6801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Squire, Sanders, & Dempsey LLP

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 / 09 / 2014

**Transaction ID : SA11AI.272677**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

## **C. Sean Dunn**

Mailing Address Sean P. Dunn & Associates  
 37 W Broad St Ste 325

City State Zip Code  
 Columbus OH 43215-4184

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Dunn & Associates LLC

Occupation

Lobbyist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 11 / 26 / 2014

**Transaction ID : SA11AI.272683**

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. KAREN L. GILLMOR**

Mailing Address 6585 LOCKHART LN

City State Zip Code  
DUBLIN OH 43017

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDUSTRIAL COMMISSION OF OHIO

Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 26 / 2014

Transaction ID : SA11AI.272689

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Tom Hwang**

Mailing Address 300 Cherry St

City State Zip Code  
Waverly OH 45690-1238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2014

Transaction ID : SA11AI.272697

Amount of Each Receipt this Period

500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. ROBERT P. KIRKLEY**

Mailing Address 7548 OVERLAND TRL

City State Zip Code  
DELAWARE OH 43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COLE ASSOCIATES

Occupation  
ENGINEER MANAGER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 08 / 2014

Transaction ID : SA11AI.272704

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. MR. NEERAJ KULSHRESTHA**

Mailing Address 8089 STORROW DR

City

WESTERVILLE

State

OH

Zip Code

43081

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FLAIRSOFT LIMITED

Occupation

EXECUTIVE

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

12 / 15 / 2014

Transaction ID : SA11AI.272707

Amount of Each Receipt this Period

300.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mrs. Denise Larr**

Mailing Address 455 Slate Run Dr

City

Powell

State

OH

Zip Code

43065-7902

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

12 / 02 / 2014

Transaction ID : SA11AI.272708

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. BEVERLY MARTIN**

Mailing Address 5632 HATTON COURT

City

HILLIARD

State

OH

Zip Code

43026-8099

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF OHIO - OHIO TUITION TRUST AUT

Occupation

MARKETING DIRECTOR

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

12 / 08 / 2014

Transaction ID : SA11AI.272713

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

1400.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Dan McCarthy**

Mailing Address 172 East State Street  
Suite 400

City State Zip Code  
Columbus OH 43215

FEC ID number of contributing  
federal political committee.

C

Name of Employer

The Success Group LLC

Occupation

Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

12 / 02 / 2014

**Transaction ID : SA11AI.272715**

Amount of Each Receipt this Period

2500.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Mr. David N. Myhal**

Mailing Address 4854 Brooksvew Cir

City State Zip Code  
New Albany OH 43054-9274

FEC ID number of contributing  
federal political committee.

C

Name of Employer

316 Group

Occupation

consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

12 / 08 / 2014

**Transaction ID : SA11AI.272720**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. Mr. Scott Owens**

Mailing Address 425 N Front St Apt 216

City State Zip Code  
Columbus OH 43215-2277

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Butler County GOP

Occupation

Executive Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

12 / 15 / 2014

**Transaction ID : SA11AI.272722**

Amount of Each Receipt this Period

100.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

2700.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

### A. Dale Stalf

Mailing Address 3357 Hammersmith Ln

City State Zip Code  
Cincinnati OH 45248-2874

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WOOD & LAMPING LLP

Occupation  
ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2014

Transaction ID : SA11AI.272735

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

### B. Mr. Dewey Stokes

Mailing Address 750 Willow Bend Ln

City State Zip Code  
Columbus OH 43204-1432

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF OHIO

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 26 / 2014

Transaction ID : SA11AI.272736

Amount of Each Receipt this Period

100.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

### C. BONNIE WARD

Mailing Address 1757 COAL DOCK RD

City State Zip Code  
WAVERLY OH 45690

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WAVERLY CITY SCHOOLS

Occupation  
TEACHER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2014

Transaction ID : SA11AI.272744

Amount of Each Receipt this Period

500.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

700.00

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Robert Weber**

Mailing Address 209 West Elkton Road

City	State	Zip Code
Seven Mile	OH	45062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	26	/	2014

Transaction ID : SA11AI.272746

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B. Robert Weber**

Mailing Address 209 West Elkton Road

City	State	Zip Code
Seven Mile	OH	45062

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	29	/	2014

Transaction ID : SA11AI.272747

Amount of Each Receipt this Period

25.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**C. MR. RICHARD WEILAND**

Mailing Address 2444 MADISON RD UNIT 1406

City	State	Zip Code
CINCINNATI	OH	45208

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RICHARD CONSULTING

CONSULTANT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	15	/	2014

Transaction ID : SA11AI.272748

Amount of Each Receipt this Period

200.00

CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mrs. Jill Winn**

Mailing Address 1327 London Dr

City

Upper Arlington

State

OH

Zip Code

43221-1541

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Supreme Court of Ohio

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 08 / 2014

**Transaction ID : SA11AI.272750**

Amount of Each Receipt this Period

200.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

200.00

13050.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 8331 LITTLE HARBOR DRIVE

City State Zip Code  
 CINCINNATI OH 45244

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

6300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 12 02 2014

**Transaction ID : SA11C.273130**

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

300.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Marcus D. Hiles**

Mailing Address 601 Canyon Drive

City State Zip Code  
Coppell TX 75019

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Western Rim Properties

Occupation

Real Estate Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
11 / 18 / 2014

**Transaction ID : SA12.278201**

Amount of Each Receipt this Period

6000.00

SB 12/14

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. JIM RENACCI FOR CONGRESS**

Mailing Address 150 SMOKERISE DRIVE

City State Zip Code  
WADSWORTH OH 44281

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

173100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 02 / 2014

**Transaction ID : SA12.273128**

Amount of Each Receipt this Period

1400.00

Contribution

Full Name (Last, First, Middle Initial)

**C. Tom Peterfy**

Mailing Address 1255 S. Ocen Blvd

City State Zip Code  
Palm Beach FL 33480

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Interactive Brokers Group

Occupation

Chairman

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 01 / 2014

**Transaction ID : SA12.278203**

Amount of Each Receipt this Period

10000.00

Transfer SB2 12/14

**[MEMO ITEM]**

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1400.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. REPUBLICAN NATIONAL COMMITTEE**

Mailing Address 310 FIRST STREET SE

City State Zip Code  
WASHINGTON DC 20003

FEC ID number of contributing  
federal political committee.

**C** C00003418

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

844590.00

Date of Receipt

**12** / **01** / **2014**

**Transaction ID : SA12.273132**

Amount of Each Receipt this Period

41250.00

Contribution

Full Name (Last, First, Middle Initial)

## **B. SENATE BATTLEGROUND FUND**

Mailing Address 228 S WASHINGTON ST  
STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5700.29

Date of Receipt

**12** / **02** / **2014**

**Transaction ID : SA12.273131**

Amount of Each Receipt this Period

5700.29

Transfer See SB 12/14

Full Name (Last, First, Middle Initial)

## **C. SENATE BATTLEGROUND FUND**

Mailing Address 228 S WASHINGTON ST  
STE 115

City State Zip Code  
ALEXANDRIA VA 22314

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14524.11

Date of Receipt

**12** / **17** / **2014**

**Transaction ID : SA12.273137**

Amount of Each Receipt this Period

8823.82

Transfer - See SB2 12/14

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

55774.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. Tiberi For Congress**

Mailing Address 2931 E Dublin Granville Rd Ste 190

City State Zip Code  
Columbus OH 43231-2098

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Candidate Committee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
12 / 09 / 2014

Transaction ID : SA12.273129

Amount of Each Receipt this Period

300.00

Contribution

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

300.00

57474.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

## **A. STIVERS FOR CONGRESS**

Mailing Address 4679 Winterset Dr

City State Zip Code  
Columbus OH 43220-8113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445794.79

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 17 / 2014

**Transaction ID : SA15.273133**

Amount of Each Receipt this Period

6372.63

Reimbursement payroll

Full Name (Last, First, Middle Initial)

## **B. STIVERS FOR CONGRESS**

Mailing Address 4679 Winterset Dr

City State Zip Code  
Columbus OH 43220-8113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

452907.03

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2014

**Transaction ID : SA15.273134**

Amount of Each Receipt this Period

7112.24

Reimbursement payroll

Full Name (Last, First, Middle Initial)

## **C. STIVERS FOR CONGRESS**

Mailing Address 4679 Winterset Dr

City State Zip Code  
Columbus OH 43220-8113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

458405.55

Date of Receipt

M M / D D / Y Y Y Y Y  
12 / 29 / 2014

**Transaction ID : SA15.273135**

Amount of Each Receipt this Period

5498.52

reimbursement payroll

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

18983.39

18983.39

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Brian Barnes**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	1		2	5			2	0	1	4		

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272809**Purpose of Disbursement  
Bonus - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

4	0	0	.	0	0
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Brian Barnes**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	9			2	0	1	4		

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272789**Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2	5	0	1	.	5	6
---	---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Blair Cathcart**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2			1	9			2	0	1	4		

Mailing Address % OH Republican Party  
211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272790**Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2	0	7	7	.	3	0
---	---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4	9	7	8	.	8	6
---	---	---	---	---	---	---

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Communications Corp of America**

Mailing Address 13195 Freedom Way

City Boston    State VA    Zip Code 22713

Purpose of Disbursement  
Direct Mail costs - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:    District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 22 / 2014
**Transaction ID : SB21B.273109**

Amount of Each Disbursement this Period

6160.88

Full Name (Last, First, Middle Initial)

**B. Lara Crotty**

Mailing Address % OH Republican Party 211 S 5th St

City Columbus    State OH    Zip Code 43215

Purpose of Disbursement  
Payroll, taxes and fees

Candidate Name

**STEVE MR. STIVERS**
Office Sought: ☒ House  
☐ Senate  
☐ President  
State: OH    District: 15

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2014
**Transaction ID : SB21B.272782**

Amount of Each Disbursement this Period

2349.77

Full Name (Last, First, Middle Initial)

**C. Lara Crotty**

Mailing Address % OH Republican Party 211 S 5th St

City Columbus    State OH    Zip Code 43215

Purpose of Disbursement  
Payroll, taxes and fees -

Candidate Name

**STEVE MR. STIVERS**
Office Sought: ☒ House  
☐ Senate  
☐ President  
State: OH    District: 15

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 20 / 2014
**Transaction ID : SB21B.272785**

Amount of Each Disbursement this Period

2350.22

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

10860.87



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Hamad**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				19				2014					

Mailing Address % ORP, 211 South 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272792**Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1250.25

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Minyet Hua**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				05				2014					

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272783**Purpose of Disbursement  
Payroll, taxes and fees -

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1509.21

**STEVE MR. STIVERS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: OH District: 15

Full Name (Last, First, Middle Initial)

**C. Minyet Hua**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				20				2014					

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272786**Purpose of Disbursement  
Payroll, taxes and fees -

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

3122.07

**STEVE MR. STIVERS**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: OH District: 15

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5881.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Justin Hucke**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
1	1		2	5		2	0	1	4

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272812**Purpose of Disbursement  
bonus not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

4	0	0	.	0	0
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Justin Hucke**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
1	2		1	9		2	0	1	4

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272793**Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

6	4	8	.	8	8
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. Tim Lanzendorfer**

Date of Disbursement

M	M		D	D		Y	Y	Y	Y
1	1		2	5		2	0	1	4

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272814**Purpose of Disbursement  
bonus not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

4	0	0	.	0	0
---	---	---	---	---	---

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►

1	4	4	.	8	8
---	---	---	---	---	---

**TOTAL** This Period (last page this line number only)..... ►

1	4	4	.	8	8
---	---	---	---	---	---

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

# OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

### A. Tim Lanzendorfer

Three digital displays showing the date 12/19/2014 in MM/DD/YYYY format. The first display shows '12' with 'M' labels above. The second shows '19' with 'D' labels above. The third shows '2014' with 'Y' labels above.

Category/  
Type

1277.83

State:  District:

**B. Mr. Matthew C. McAuliffe**

Category/  
Type

5223.60

State:  District:

### C. Jeffery Pastor

Category/  
Type

400.00

State:  District:

6901.43

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Jeffery Pastor**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				19				2014					

Mailing Address 211 S. Fifth St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272796**Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

2487.54

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. Deb Pettit**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				02				2014					

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272871**Purpose of Disbursement  
Reimbursement - see DP 12/14 - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

44.97

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. PLIC - SBD Grand Island**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				02				2014					

Mailing Address PO Box 10372

City	State	Zip Code
Des Moines	IA	50306

**Transaction ID : SB21B.273033**Purpose of Disbursement  
Employee insurance premium - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

856.71

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3389.22

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mr. Bevan Schneck**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				05				2014					

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272784**Purpose of Disbursement  
Payroll, taxes and fees -

Amount of Each Disbursement this Period

Candidate Name

**STEVE MR. STIVERS**Category/  
Type

1639.54

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: OH    District: 15

Full Name (Last, First, Middle Initial)

**B. Mr. Bevan Schneck**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
12				20				2014					

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

**Transaction ID : SB21B.272787**Purpose of Disbursement  
Payroll, taxes and fees -

Amount of Each Disbursement this Period

Candidate Name

**STEVE MR. STIVERS**Category/  
Type

1639.95

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: OH    District: 15

Full Name (Last, First, Middle Initial)

**C. Staples - Beechmont Rd**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		4	5	6		7	8	9	0	1	2
10				30				2014					

Mailing Address 8666 Beechmont Rd

City	State	Zip Code
Cincinnati	OH	45255

**Transaction ID : SB21B.272868**Purpose of Disbursement  
EH 12/14 - office supplies - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

24.49

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3279.49

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Staples - Beechmont Rd**

Mailing Address 8666 Beechmont Rd

City Cincinnati      State OH      Zip Code 45255

Purpose of Disbursement  
EH 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 30 / 2014
**Transaction ID : SB21B.272869**

Amount of Each Disbursement this Period

24.54

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples - Beechmont Rd**

Mailing Address 8666 Beechmont Rd

City Cincinnati      State OH      Zip Code 45255

Purpose of Disbursement  
EH 12/14 - shipping costs - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 06 / 2014
**Transaction ID : SB21B.272870**

Amount of Each Disbursement this Period

89.99

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Employee insurance premium - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.273036**

Amount of Each Disbursement this Period

223.74

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

223.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Employee insurance premium

Candidate Name

**STEVE MR. STIVERS**
Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State: OH      District: 15

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.273037**

Amount of Each Disbursement this Period

130.80

Full Name (Last, First, Middle Initial)

**B. Superior Dental Care**

Mailing Address 6683 Centerville Business Pkwy

City Centerville      State OH      Zip Code 45459

Purpose of Disbursement  
Employee insurance premium - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.273038**

Amount of Each Disbursement this Period

550.74

Full Name (Last, First, Middle Initial)

**C. Two Caterers Inc**

Mailing Address 6800 Schrock Hill Ct

City Columbus      State OH      Zip Code 43229

Purpose of Disbursement  
Food/Beverages - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary   ☐ General  
☐ Other (specify) ▼

State:      District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 02 / 2014
**Transaction ID : SB21B.272866**

Amount of Each Disbursement this Period

5536.96

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6218.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. United Health Care**

Mailing Address 9200 Worthington Rd

City	State	Zip Code
Westerville	OH	43082

Purpose of Disbursement  
Employee Insurance Premium - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB21B.273030**

Amount of Each Disbursement this Period

5349.01
---------

Full Name (Last, First, Middle Initial)

**B. United Health Care**

Mailing Address 9200 Worthington Rd

City	State	Zip Code
Westerville	OH	43082

Purpose of Disbursement  
Employee Insurance Premium - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB21B.273031**

Amount of Each Disbursement this Period

3775.76
---------

Full Name (Last, First, Middle Initial)

**C. United Health Care - Life**

Mailing Address Dept CH 10151

City	State	Zip Code
Palantine	IL	60055

Purpose of Disbursement  
Staff insurance premium - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2014

**Transaction ID : SB21B.279239**

Amount of Each Disbursement this Period

387.62
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

9512.39
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UnitedHealthCare Insurance**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		0	1	2		2	0	1	4		

Mailing Address 22070 Network Pl

**Transaction ID : SB21B.273029**

City	State	Zip Code
Chicago	IL	60673

Amount of Each Disbursement this Period

Purpose of Disbursement  
Employee insurance premium

9	4	3	.	9	5
---	---	---	---	---	---

Candidate Name

**STEVE MR. STIVERS**Category/  
Type
Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State: OH    District: 15

Full Name (Last, First, Middle Initial)

**B. Meghan Wadsworth**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	1	2		1	1	2		2	0	1	4		

Mailing Address % ORP 211 S 5th St

**Transaction ID : SB21B.272813**

City	State	Zip Code
Columbus	OH	43215

Amount of Each Disbursement this Period

Purpose of Disbursement  
bonus not candidate specific

4	0	0	.	0	0
---	---	---	---	---	---

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Full Name (Last, First, Middle Initial)

**C. Meghan Wadsworth**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
1	2	3		1	1	2		2	0	1	4		

Mailing Address % ORP 211 S 5th St

**Transaction ID : SB21B.272797**

City	State	Zip Code
Columbus	OH	43215

Amount of Each Disbursement this Period

Purpose of Disbursement  
Payroll, taxes, fees - not candidate specific

1	5	3	.	9	0
---	---	---	---	---	---

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2	8	8	.	7	5
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Walmart - Zanesville**

Mailing Address 2850 Maple Ave

City	State	Zip Code
Zanesville	OH	43701

Purpose of Disbursement  
DP 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

**Transaction ID : SB21B.272872**

Amount of Each Disbursement this Period

14.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Walmart - Zanesville**

Mailing Address 2850 Maple Ave

City	State	Zip Code
Zanesville	OH	43701

Purpose of Disbursement  
DP 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

**Transaction ID : SB21B.272873**

Amount of Each Disbursement this Period

10.69
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Walmart - Zanesville**

Mailing Address 2850 Maple Ave

City	State	Zip Code
Zanesville	OH	43701

Purpose of Disbursement  
DP 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB21B.272874**

Amount of Each Disbursement this Period

19.29
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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57378.18
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. 5 Boroughs Pizza - Cincinnati**

Mailing Address 4105 North Bend Rd

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

**Transaction ID : SB30B.272935**

Amount of Each Disbursement this Period

14.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. 5th Street Pub**

Mailing Address 105 W. 5th St.

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

**Transaction ID : SB30B.272896**

Amount of Each Disbursement this Period

24.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Ace Hardware - Independence**

Mailing Address 6500 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 yard sign supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272841**

Amount of Each Disbursement this Period

9.14
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Acme - Cuyahoga Falls**

Mailing Address 2630 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - Office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	01	/	2014

**Transaction ID : SB30B.272964**

Amount of Each Disbursement this Period

8.58
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Acme - Cuyahoga Falls**

Mailing Address 2630 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	28	/	2014

**Transaction ID : SB30B.272975**

Amount of Each Disbursement this Period

15.16
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Acme - Cuyahoga Falls**

Mailing Address 2630 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB30B.272960**

Amount of Each Disbursement this Period

10.00
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Acme - Cuyahoga Falls**

Mailing Address 2630 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

**Transaction ID : SB30B.272984**

Amount of Each Disbursement this Period

2.86
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Acme - Cuyahoga Falls**

Mailing Address 2630 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

**Transaction ID : SB30B.272992**

Amount of Each Disbursement this Period

24.61
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Amazon.com**

Mailing Address 1516 2nd Ave Fl 4

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement  
ND 1214 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272985**

Amount of Each Disbursement this Period

41.97
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Amazon.com**

Mailing Address 1516 2nd Ave Fl 4

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement  
JW 12/14 - volunteer supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

**Transaction ID : SB30B.272907**

Amount of Each Disbursement this Period

10.95
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Amazon.com**

Mailing Address 1516 2nd Ave Fl 4

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement  
JW 12/14 - volunteer supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

**Transaction ID : SB30B.272908**

Amount of Each Disbursement this Period

24.67
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Angie's Pizza - Independence**

Mailing Address 6932 Hillside Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.272850**

Amount of Each Disbursement this Period

23.50
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Angie's Pizza - Independence**

Mailing Address 6932 Hillside Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.273041**

Amount of Each Disbursement this Period

25.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Brian Barnes**

Mailing Address % OH Rep Party, 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272760**

Amount of Each Disbursement this Period

2505.46
---------

Full Name (Last, First, Middle Initial)

**C. Best Buy - Hamilton**

Mailing Address 3435 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - Cable for phones - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2014

**Transaction ID : SB30B.272920**

Amount of Each Disbursement this Period

21.29
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2505.46
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Block House Coffee**

Mailing Address 3101 Price St

City	State	Zip Code
Cincinnati	OH	45205

Purpose of Disbursement  
BK 12/14 - gas - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

**Transaction ID : SB30B.273101**

Amount of Each Disbursement this Period

328.66
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Conner Brintlinger**

Mailing Address 211 S. Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - see CB 12/14 - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		15		2014

**Transaction ID : SB30B.273105**

Amount of Each Disbursement this Period

328.66
--------

Full Name (Last, First, Middle Initial)

**C. BW3 - Hamilton**

Mailing Address 3417 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		28		2014

**Transaction ID : SB30B.272921**

Amount of Each Disbursement this Period

19.99
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

328.66
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 41 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Blair Cathcart**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12		05		2014

Mailing Address % OH Republican Party  
211 S 5th St

City Columbus State OH Zip Code 43215

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB30B.272761**

Amount of Each Disbursement this Period

2076.87

Full Name (Last, First, Middle Initial)

**B. Chester's Pizza**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		07		2014

Mailing Address 2929 Dixie Hwy

City Hamilton State OH Zip Code 45015

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB30B.272927**

Amount of Each Disbursement this Period

64.00

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Chester's Pizza**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		20		2014

Mailing Address 2929 Dixie Hwy

City Hamilton State OH Zip Code 45015

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID : SB30B.272915**

Amount of Each Disbursement this Period

56.94

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2076.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Chick Fil A - Hamilton**

Mailing Address 3403 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	28	/	2014

**Transaction ID : SB30B.272923**

Amount of Each Disbursement this Period

26.70
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Chipotle - Cuyahoga Falls**

Mailing Address 375 Howe Rd

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	12	/	2014

**Transaction ID : SB30B.272968**

Amount of Each Disbursement this Period

12.01
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Chipotle - Hamilton**

Mailing Address 335 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	23	/	2014

**Transaction ID : SB30B.273139**

Amount of Each Disbursement this Period

23.40
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Cincinnati Bell**

Mailing Address PO Box 748003

City	State	Zip Code
Cincinnati	OH	45274

Purpose of Disbursement  
Phones - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		30		2014

**Transaction ID : SB30B.273111**

Amount of Each Disbursement this Period

4315.56
---------

Full Name (Last, First, Middle Initial)

**B. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		02		2014

**Transaction ID : SB30B.272834**

Amount of Each Disbursement this Period

12.94
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

**Transaction ID : SB30B.272842**

Amount of Each Disbursement this Period

5.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

4315.56
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
JF 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

**Transaction ID : SB30B.272827**

Amount of Each Disbursement this Period

6.80
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272853**

Amount of Each Disbursement this Period

59.10
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272854**

Amount of Each Disbursement this Period

9.17
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272855**

Amount of Each Disbursement this Period

23.15
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM12/14/2 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

**Transaction ID : SB30B.273040**

Amount of Each Disbursement this Period

30.97
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.273042**

Amount of Each Disbursement this Period

8.64
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.273046**

Amount of Each Disbursement this Period

4.31
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. CVS - Independence**

Mailing Address 6527 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.273047**

Amount of Each Disbursement this Period

28.08
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Ms. Nancy DeLambo**

Mailing Address 2243 Liberty Street

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
Reimbursement - See ND 12/14 - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272959**

Amount of Each Disbursement this Period

495.25
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

495.25

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DeVittis Pizza**

Mailing Address 560 E Talmadge Ave

City	State	Zip Code
Akron	OH	44310

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		23		2014

**Transaction ID : SB30B.272972**

Amount of Each Disbursement this Period

12.87
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Dollar General - Akron**

Mailing Address 1770 Merriman Rd.

City	State	Zip Code
Akron	OH	44313

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2014

**Transaction ID : SB30B.272962**

Amount of Each Disbursement this Period

6.00
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Dollar General - Canal Fulton**

Mailing Address 2406 Locust St., S

City	State	Zip Code
Canal Fulton	OH	44614

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

**Transaction ID : SB30B.273086**

Amount of Each Disbursement this Period

3.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Dollar General - Canal Fulton**

Mailing Address 2406 Locust St., S

City	State	Zip Code
Canal Fulton	OH	44614

Purpose of Disbursement  
BW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

**Transaction ID : SB30B.273087**

Amount of Each Disbursement this Period

6.90
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Dollar General - Munroe Falls**

Mailing Address 50 Northmoreland Ave.

City	State	Zip Code
Munroe	OH	44262

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		03		2014

**Transaction ID : SB30B.272965**

Amount of Each Disbursement this Period

42.07
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Dollar General - Munroe Falls**

Mailing Address 50 Northmoreland Ave.

City	State	Zip Code
Munroe	OH	44262

Purpose of Disbursement  
ND 12/14 - Office Supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		12		2014

**Transaction ID : SB30B.272967**

Amount of Each Disbursement this Period

7.03
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 49 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Domino's - Cinci**

Mailing Address 3348 Glenmore Ave

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2014

**Transaction ID : SB30B.272934**

Amount of Each Disbursement this Period

11.98
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Domino's - Cinci**

Mailing Address 3348 Glenmore Ave

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : SB30B.272952**

Amount of Each Disbursement this Period

15.98
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Donatos - Cuyahoga Falls**

Mailing Address 1710 State Rd

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

**Transaction ID : SB30B.272976**

Amount of Each Disbursement this Period

17.19
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 50 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Donatos - Cuyahoga Falls**

Mailing Address 1710 State Rd

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

**Transaction ID : SB30B.272990**

Amount of Each Disbursement this Period

19.79
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Donatos - Cuyahoga Falls**

Mailing Address 1710 State Rd

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.272998**

Amount of Each Disbursement this Period

30.28
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Dunkin Donuts - Cincinnati**

Mailing Address 5431 North Bend rd

City	State	Zip Code
Cincinnati	OH	45247

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.272944**

Amount of Each Disbursement this Period

38.15
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Dunkin Donuts - Cincinnati**

Mailing Address 5431 North Bend rd

City	State	Zip Code
Cincinnati	OH	45247

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

**Transaction ID : SB30B.272949**

Amount of Each Disbursement this Period

22.98
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. East of Chicago Pizza - Cuyahoga Falls**

Mailing Address 2603 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272978**

Amount of Each Disbursement this Period

40.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. East of Chicago Pizza - Cuyahoga Falls**

Mailing Address 2603 Bailey Rd.

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

**Transaction ID : SB30B.272991**

Amount of Each Disbursement this Period

29.00
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Liv Evans**

Mailing Address 859 Green Cook Rd

City	State	Zip Code
Sunbury	OH	43074

Purpose of Disbursement  
Music election night - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.273026**

Amount of Each Disbursement this Period

400.00
--------

Full Name (Last, First, Middle Initial)

**B. FedEx - Perrysburg**

Mailing Address 25950 N Dixie Hgw

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
TL 12/14 - shipping costs - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

**Transaction ID : SB30B.272861**

Amount of Each Disbursement this Period

11.72
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Fed Ex Kinkos - Cincinnati**

Mailing Address 5044 Glencrossing Way

City	State	Zip Code
Cincinnati	OH	45238

Purpose of Disbursement  
MH 12/14 - Copying costs - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		06		2014

**Transaction ID : SB30B.272937**

Amount of Each Disbursement this Period

36.83
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

400.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Fed Ex Kinkos - Cincinnati**

Mailing Address 5044 Glencrossing Way

City	State	Zip Code
Cincinnati	OH	45238

Purpose of Disbursement  
MH 12/14 - copying charges - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272939**

Amount of Each Disbursement this Period

36.83
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jessica Friedhoff**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - not candidate specific - see JF 12/14

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272824**

Amount of Each Disbursement this Period

257.25
--------

Full Name (Last, First, Middle Initial)

**C. Jessica Friedhoff**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272762**

Amount of Each Disbursement this Period

1284.45
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1541.70
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GFS - Canton**

Mailing Address 4324 Whipple Ave, NW

City	State	Zip Code
Canton	OH	44718

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

**Transaction ID : SB30B.273085**

Amount of Each Disbursement this Period

25.91
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. GFS - Canton**

Mailing Address 4324 Whipple Ave, NW

City	State	Zip Code
Canton	OH	44718

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

**Transaction ID : SB30B.273090**

Amount of Each Disbursement this Period

30.48
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. GFS - Canton**

Mailing Address 4324 Whipple Ave, NW

City	State	Zip Code
Canton	OH	44718

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.273093**

Amount of Each Disbursement this Period

37.56
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GFS - Canton**

Mailing Address 4324 Whipple Ave, NW

City	State	Zip Code
Canton	OH	44718

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

**Transaction ID : SB30B.273095**

Amount of Each Disbursement this Period

16.48
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. GFS - Fairfield**

Mailing Address 6905 Dixie Highway

City	State	Zip Code
Fairfield	OH	45014

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

**Transaction ID : SB30B.272928**

Amount of Each Disbursement this Period

19.97
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. GFS - Maumee**

Mailing Address 1450 Maumee Rd

City	State	Zip Code
Maumee	OH	43537

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB30B.272912**

Amount of Each Disbursement this Period

36.27
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. GFS - Maumee**

Mailing Address 1450 Maumee Rd

City	State	Zip Code
Maumee	OH	43537

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

**Transaction ID : SB30B.272893**

Amount of Each Disbursement this Period

37.96
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Giant Eagle - Canal Fulton**

Mailing Address 2276 Locust St

City	State	Zip Code
Canal Fulton	OH	44614

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.273091**

Amount of Each Disbursement this Period

13.56
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Giant Eagle - Canal Fulton**

Mailing Address 2276 Locust St

City	State	Zip Code
Canal Fulton	OH	44614

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

**Transaction ID : SB30B.273092**

Amount of Each Disbursement this Period

20.09
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Giant Eagle - Canal Fulton**

Mailing Address 2276 Locust St

City	State	Zip Code
Canal Fulton	OH	44614

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		25		2014

**Transaction ID : SB30B.273094**

Amount of Each Disbursement this Period

25.30
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Giant Eagle - Cuyahoga Falls**

Mailing Address 75 Graham Rd

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SB30B.272996**

Amount of Each Disbursement this Period

18.73
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Giant Eagle - Garfield Heights**

Mailing Address 5744 Transportation Blvd

City	State	Zip Code
Garfield Heights	OH	44125

Purpose of Disbursement  
SM 12/14 - volunteer food/beverage - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272837**

Amount of Each Disbursement this Period

108.04
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 58 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Giant Eagle - Garfield Heights**

Mailing Address 5744 Transportation Blvd

City	State	Zip Code
Garfield Heights	OH	44125

Purpose of Disbursement  
SM 12/14 - volunteer food/beverages - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272843**

Amount of Each Disbursement this Period

114.75
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Giant Eagle - Garfield Heights**

Mailing Address 5744 Transportation Blvd

City	State	Zip Code
Garfield Heights	OH	44125

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272848**

Amount of Each Disbursement this Period

27.70
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Giant Eagle - Twinsburg**

Mailing Address 8960 Darrow Road

City	State	Zip Code
Twinsburg	OH	44087

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2014

**Transaction ID : SB30B.272833**

Amount of Each Disbursement this Period

21.76
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Elizabeth Hamad**

Mailing Address % ORP, 211 South 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272763**

Amount of Each Disbursement this Period

1254.21
---------

Full Name (Last, First, Middle Initial)

**B. Hampton Inn- Cincinnati Northwest**

Mailing Address 430 Kolb Drive

City	State	Zip Code
Fairfield	OH	45014

Purpose of Disbursement  
hotel rooms - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

**Transaction ID : SB30B.272815**

Amount of Each Disbursement this Period

6947.46
---------

Full Name (Last, First, Middle Initial)

**C. Michael Harlow**

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
MH 12/14 - Mileage reimbursement - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SB30B.272958**

Amount of Each Disbursement this Period

120.00
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8201.67

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Michael Harlow**

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - see MH 12/14 - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

**Transaction ID : SB30B.272933**

Amount of Each Disbursement this Period

866.64
--------

Full Name (Last, First, Middle Initial)

**B. Home Depot - Mentor**

Mailing Address 9651 Diamond Center Dr

City	State	Zip Code
Mentor	OH	44060

Purpose of Disbursement  
JF 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	23	/	2014

**Transaction ID : SB30B.272829**

Amount of Each Disbursement this Period

17.44
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Home Depot - Western Hills**

Mailing Address 6300 Glenway Ave

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - Office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	07	/	2014

**Transaction ID : SB30B.272940**

Amount of Each Disbursement this Period

9.98
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

866.64
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Justin Hucke**

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272764**

Amount of Each Disbursement this Period

1291.38
---------

Full Name (Last, First, Middle Initial)

**B. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		04		2014

**Transaction ID : SB30B.272835**

Amount of Each Disbursement this Period

28.50
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.272849**

Amount of Each Disbursement this Period

59.50
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1291.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272852**

Amount of Each Disbursement this Period

30.63
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272857**

Amount of Each Disbursement this Period

30.63
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.273043**

Amount of Each Disbursement this Period

61.40
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Jimmy John's - Independence**

Mailing Address 6800 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SB30B.273045**

Amount of Each Disbursement this Period

30.70
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Jimmy Johns - Rossford**

Mailing Address 10081 Freemont Pike

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

**Transaction ID : SB30B.272883**

Amount of Each Disbursement this Period

25.49
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jimmy Johns - Rossford**

Mailing Address 10081 Freemont Pike

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.272886**

Amount of Each Disbursement this Period

48.95
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Krogers**

Mailing Address 150 West Sycamore Street

City	State	Zip Code
Columbus	OH	43216

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.272955**

Amount of Each Disbursement this Period

11.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Krogers-Bowling Green**

Mailing Address 1094 N Main St

City	State	Zip Code
Bowling Green	OH	43402

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		03		2014

**Transaction ID : SB30B.272898**

Amount of Each Disbursement this Period

55.85
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Krogers - Fairfield**

Mailing Address 560 Wessel Rd

City	State	Zip Code
Fairfield	OH	45014

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB30B.272919**

Amount of Each Disbursement this Period

46.76
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Krogers - Hamiton - 1450 South Erie Blvd**

Mailing Address 1450 South Erie Blvd

City	State	Zip Code
Hamilton	OH	45015

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272917**

Amount of Each Disbursement this Period

6.98
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Krogers - Maumee**

Mailing Address 1435 Reynolds Rd

City	State	Zip Code
Maumee	OH	43537

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

**Transaction ID : SB30B.272910**

Amount of Each Disbursement this Period

3.99
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Krogers - Perrysburg**

Mailing Address 27386 Carronade Dr.

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

State: District:

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

**Transaction ID : SB30B.272900**

Amount of Each Disbursement this Period

55.93
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 66 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Krogers - Perrysburg**

Mailing Address 27386 Carronade Dr.

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

**Transaction ID : SB30B.272909**

Amount of Each Disbursement this Period

48.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Krogers - Perrysburg**

Mailing Address 27386 Carronade Dr.

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.272891**

Amount of Each Disbursement this Period

27.97
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Krogers - Waterville**

Mailing Address 8730 Waterville Swanson Rd

City	State	Zip Code
Waterville	OH	43566

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.272887**

Amount of Each Disbursement this Period

13.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Tim Lanzendorfer**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - see TL 12/14 - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272858**

Amount of Each Disbursement this Period

273.15
--------

Full Name (Last, First, Middle Initial)

**B. Tim Lanzendorfer**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272765**

Amount of Each Disbursement this Period

1284.90
---------

Full Name (Last, First, Middle Initial)

**C. Marco's**

Mailing Address 629 W South Boundary St.

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

**Transaction ID : SB30B.272901**

Amount of Each Disbursement this Period

28.90
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1558.05
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Marco's Pizza**

Mailing Address 4885 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

**Transaction ID : SB30B.272840**

Amount of Each Disbursement this Period

21.19
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Marco's Pizza - Cuyahoga Falls**

Mailing Address 430 Portage Trail

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

**Transaction ID : SB30B.272982**

Amount of Each Disbursement this Period

14.15
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Master Pizza**

Mailing Address 1194 Tallmade Rd

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.272988**

Amount of Each Disbursement this Period

33.25
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Master Pizza**

Mailing Address 1194 Tallmade Rd

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.272993**

Amount of Each Disbursement this Period

20.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Mr. Matthew C. McAuliffe**

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272767**

Amount of Each Disbursement this Period

5245.38
---------

Full Name (Last, First, Middle Initial)

**C. Meijer's - Rossford**

Mailing Address 10055 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

**Transaction ID : SB30B.272906**

Amount of Each Disbursement this Period

3.34
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

5245.38
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Meijer's - Rossford**

Mailing Address 10055 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : SB30B.272890**

Amount of Each Disbursement this Period

21.35
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Meijer's - Rossford**

Mailing Address 10055 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

**Transaction ID : SB30B.272881**

Amount of Each Disbursement this Period

2.79
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Mrs. Sara Molski**

Mailing Address 2133 Quarry Valley Rd

City	State	Zip Code
Columbus	OH	43204-4985

Purpose of Disbursement  
Reimbursement - see SM 12/14 - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272832**

Amount of Each Disbursement this Period

663.09
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

663.09
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Mrs. Sara Molski**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		09		2014

Mailing Address 2133 Quarry Valley Rd

City	State	Zip Code
Columbus	OH	43204-4985

**Transaction ID : SB30B.273039**Purpose of Disbursement  
Reimbursement - See SM 12/14/2 - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

332.60

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. NYPD Pizza**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Mailing Address 3721 Harrison Avenue

City	State	Zip Code
Cincinnati	OH	45211

**Transaction ID : SB30B.272945**Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

34.98

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. NYPD Pizza**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Mailing Address 3721 Harrison Avenue

City	State	Zip Code
Cincinnati	OH	45211

**Transaction ID : SB30B.272948**Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

36.87

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

332.60

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NYPD Pizza**

Mailing Address 3721 Harrison Avenue

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		27		2014

**Transaction ID : SB30B.272950**

Amount of Each Disbursement this Period

31.98
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. NYPD Pizza**

Mailing Address 3721 Harrison Avenue

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

**Transaction ID : SB30B.272951**

Amount of Each Disbursement this Period

31.98
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. NYPD Pizza**

Mailing Address 3721 Harrison Avenue

City	State	Zip Code
Cincinnati	OH	45211

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.272954**

Amount of Each Disbursement this Period

47.97
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. OfficeMax - Canton**

Mailing Address 4433 Whipple Ave, NW

City	State	Zip Code
Canton	OH	44718

Purpose of Disbursement  
BW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		09		2014

**Transaction ID : SB30B.273088**

Amount of Each Disbursement this Period

10.43
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Office Max - Garfield Heights**

Mailing Address 5660 Transporation Blvd

City	State	Zip Code
Garfield Hgts	OH	44125

Purpose of Disbursement  
JF 12/14 - office supplies, printer cartridges not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

**Transaction ID : SB30B.272825**

Amount of Each Disbursement this Period

194.39
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Office Max - Garfield Heights**

Mailing Address 5660 Transporation Blvd

City	State	Zip Code
Garfield Hgts	OH	44125

Purpose of Disbursement  
JF 12/14 office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

**Transaction ID : SB30B.272831**

Amount of Each Disbursement this Period

29.99
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 74 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Office Max - Perrysburg**

Mailing Address 10025 Fremont Pike

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272903**

Amount of Each Disbursement this Period

66.17
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Papa Bears**

Mailing Address PO Box 35427

City	State	Zip Code
Canton	OH	44735

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.273096**

Amount of Each Disbursement this Period

30.95
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Papa John's**

Mailing Address 2304 Dixie Hgwy

City	State	Zip Code
Hamilton	OH	45015

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272942**

Amount of Each Disbursement this Period

39.00
-------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Papa John's - Canton**

Mailing Address 3001 Cleveland Ave., NW

City	State	Zip Code
Canton	OH	44709

Purpose of Disbursement  
BW 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.273098**

Amount of Each Disbursement this Period

50.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Papa John's - Cuyahoga Falls**

Mailing Address 1630 State Rd

City	State	Zip Code
Cuyahoga Falls	OH	44223

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

**Transaction ID : SB30B.272986**

Amount of Each Disbursement this Period

16.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Jeffery Pastor**

Mailing Address 211 S. Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272766**

Amount of Each Disbursement this Period

2500.05
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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

2500.05
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Pizza Hut - Fairfield**

Mailing Address 510 Miller Rd

City Fairfield	State OH	Zip Code 45014
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Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

**Transaction ID : SB30B.272916**

Amount of Each Disbursement this Period

11.99
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Pizza Hut - Guyahoga Falls**

Mailing Address 2893 State Rd.

City Cuyahoga Falls	State OH	Zip Code 44223
------------------------	-------------	-------------------

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2014

**Transaction ID : SB30B.272970**

Amount of Each Disbursement this Period

28.79
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Pizza Hut - Perrysburg**

Mailing Address 9111 E. Douglas

City Perrysburg	State OH	Zip Code 43551
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Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

**Transaction ID : SB30B.272913**

Amount of Each Disbursement this Period

39.48
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Pizza Hut - Perrysburg**

Mailing Address 9111 E. Douglas

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

**Transaction ID : SB30B.272878**

Amount of Each Disbursement this Period

29.22
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Pizza Hut - Perrysburg**

Mailing Address 9111 E. Douglas

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : SB30B.272889**

Amount of Each Disbursement this Period

38.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Pizza Hut - Perrysburg**

Mailing Address 9111 E. Douglas

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

**Transaction ID : SB30B.272880**

Amount of Each Disbursement this Period

57.73
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Pizza Hut - Perrysburg**

Mailing Address 9111 E. Douglas

City	State	Zip Code
Perrysburg	OH	43551

Purpose of Disbursement  
JW 12/14 food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SB30B.272885**

Amount of Each Disbursement this Period

30.25
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Quail Hollow Resort**

Mailing Address 11080 Concord Hambden Rd

City	State	Zip Code
Painesville	OH	44077

Purpose of Disbursement  
hotel rooms - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		26		2014

**Transaction ID : SB30B.272816**

Amount of Each Disbursement this Period

1676.22
---------

Full Name (Last, First, Middle Initial)

**C. Remke Markets - Western Hills**

Mailing Address 5071 Glencrossing Way

City	State	Zip Code
Cincinnati	OH	45230

Purpose of Disbursement  
MH 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

**Transaction ID : SB30B.272941**

Amount of Each Disbursement this Period

3.15
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1676.22
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Remke Markets - Western Hills**

Mailing Address 5071 Glencrossing Way

City	State	Zip Code
Cincinnati	OH	45230

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		16		2014

**Transaction ID : SB30B.272943**

Amount of Each Disbursement this Period

100.41
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Remke Markets - Western Hills**

Mailing Address 5071 Glencrossing Way

City	State	Zip Code
Cincinnati	OH	45230

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

**Transaction ID : SB30B.272953**

Amount of Each Disbursement this Period

75.96
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Rite Aid - Cuyahoga Falls**

Mailing Address 1914 Bailey Rd

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		10		2014

**Transaction ID : SB30B.272980**

Amount of Each Disbursement this Period

26.11
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Rocco's Pizza - Cuyahoga Falls**

Mailing Address 1053 Portage Tr.

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2014

**Transaction ID : SB30B.272973**

Amount of Each Disbursement this Period

12.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Romito's Pizza**

Mailing Address 6474 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272846**

Amount of Each Disbursement this Period

25.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Romito's Pizza**

Mailing Address 6474 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		24		2014

**Transaction ID : SB30B.272856**

Amount of Each Disbursement this Period

25.00
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Romito's Pizza**

Mailing Address 6474 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

**Transaction ID : SB30B.273044**

Amount of Each Disbursement this Period

17.00
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Romito's Pizza**

Mailing Address 6474 Brecksville Rd

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14/2 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		04		2014

**Transaction ID : SB30B.273048**

Amount of Each Disbursement this Period

60.00
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Shell - South High St**

Mailing Address 631 South High St.

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
BK 12/14 - gas - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

**Transaction ID : SB30B.273103**

Amount of Each Disbursement this Period

37.71
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Skyline Chili**

Mailing Address 9135 Owenfield Rd

City	State	Zip Code
Lewis Center	OH	43035

Purpose of Disbursement  
Food/beverage GOTV not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12	/	02	/	2014

**Transaction ID : SB30B.273028**

Amount of Each Disbursement this Period

962.45
--------

Full Name (Last, First, Middle Initial)

**B. Staples-Bowling Green**

Mailing Address 1080 S Main St

City	State	Zip Code
Bowling Green	OH	43402

Purpose of Disbursement  
TL 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09	/	30	/	2014

**Transaction ID : SB30B.272859**

Amount of Each Disbursement this Period

37.87
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Staples-Bowling Green**

Mailing Address 1080 S Main St

City	State	Zip Code
Bowling Green	OH	43402

Purpose of Disbursement  
TL 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10	/	06	/	2014

**Transaction ID : SB30B.272860**

Amount of Each Disbursement this Period

186.80
--------

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

962.45
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Staples-Bowling Green**

Mailing Address 1080 S Main St

City	State	Zip Code
Bowling Green	OH	43402

Purpose of Disbursement  
TL 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		14		2014

**Transaction ID : SB30B.272864**

Amount of Each Disbursement this Period

28.82
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Staples - Olentangy**

Mailing Address 1749 Olentangy River Rd

City	State	Zip Code
Columbus	OH	43212

Purpose of Disbursement  
CB 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

**Transaction ID : SB30B.273108**

Amount of Each Disbursement this Period

242.70
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Joseph Statzer**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - see JS 12/14 - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272914**

Amount of Each Disbursement this Period

357.94
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

357.94
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Target**

Mailing Address 41 S. High Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
CB 12/14 - Umbrellas - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

**Transaction ID : SB30B.273107**

Amount of Each Disbursement this Period

85.96
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Target - Cuyahoga Falls**

Mailing Address 449 Howe Ave

City	State	Zip Code
Cuyahoga Falls	OH	44221

Purpose of Disbursement  
ND 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		02		2014

**Transaction ID : SB30B.272994**

Amount of Each Disbursement this Period

6.80
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Target - Rossford**

Mailing Address 9666 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		08		2014

**Transaction ID : SB30B.272899**

Amount of Each Disbursement this Period

2.99
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Target - Rossford**

Mailing Address 9666 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272905**

Amount of Each Disbursement this Period

2.11
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Target - Rossford**

Mailing Address 9666 Olde US 20

City	State	Zip Code
Rossford	OH	43460

Purpose of Disbursement  
JW 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

**Transaction ID : SB30B.272895**

Amount of Each Disbursement this Period

16.08
-------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. The Printed Image**

Mailing Address 41 South Grant Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Printing election night credentials - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		22		2014

**Transaction ID : SB30B.273110**

Amount of Each Disbursement this Period

434.33
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

434.33
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UDF - Cincinnati**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2014

Mailing Address 6701 Beechmont Ave

**Transaction ID : SB30B.272946**

City	State	Zip Code
Cincinnati	OH	45230

Amount of Each Disbursement this Period

Purpose of Disbursement  
MH 12/14 - food for volunteers - not candidate specificCategory/  
Type

8.98

Candidate Name

**[MEMO ITEM]**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**B. UPS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		04		2014

Mailing Address PO Box 7247-0244

**Transaction ID : SB30B.273049**

Amount of Each Disbursement this Period

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement  
SM 12/14/2 - shipping costs - not candidate specificCategory/  
Type

66.50

Candidate Name

**[MEMO ITEM]**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

**C. UPS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		07		2014

Mailing Address PO Box 7247-0244

**Transaction ID : SB30B.272956**

Amount of Each Disbursement this Period

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement  
MH 12/14 - shipping costs - not candidate specificCategory/  
Type

90.34

Candidate Name

**[MEMO ITEM]**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UPS**

Mailing Address PO Box 7247-0244

City	State	Zip Code
Philadelphia	PA	19170

Purpose of Disbursement  
MH 12/14 - Shipping costs - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		07		2014

**Transaction ID : SB30B.272957**

Amount of Each Disbursement this Period

117.31
--------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Meghan Wadsworth**

Mailing Address % ORP 211 S 5th St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Payroll, taxes and fees - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		05		2014

**Transaction ID : SB30B.272768**

Amount of Each Disbursement this Period

1539.37
---------

Full Name (Last, First, Middle Initial)

**C. Jeremiah Wagner**

Mailing Address 211 South Fifth Street

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement see JW 12/14 - not candidate specific

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		02		2014

**Transaction ID : SB30B.272877**

Amount of Each Disbursement this Period

751.44
--------

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2290.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 88 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Walgreens - Independence**

Mailing Address 6900 Rockside Road

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
JF 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		18		2014

**Transaction ID : SB30B.272828**

Amount of Each Disbursement this Period

8.63
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Walmart - Bowling Green**

Mailing Address 131 W Gypsy Lane Rd

City	State	Zip Code
Bowling Green	OH	43402

Purpose of Disbursement  
TL 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272863**

Amount of Each Disbursement this Period

7.94
------

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. Walmart - Hamilton**

Mailing Address 3201 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - office supplies - not candidate specific

Candidate Name

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		07		2014

**Transaction ID : SB30B.272925**

Amount of Each Disbursement this Period

45.06
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 89 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Wendy's - Hamiton**

Mailing Address 3213 Princeton Rd

City	State	Zip Code
Hamilton	OH	45011

Purpose of Disbursement  
JS 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		11		2014

**Transaction ID : SB30B.272930**

Amount of Each Disbursement this Period

272930	12.86
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**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Beth Williams**

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Reimbursement - see BW 12/14 - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		11		2014

**Transaction ID : SB30B.273084**

Amount of Each Disbursement this Period

273084	270.66
--------	--------

Full Name (Last, First, Middle Initial)

**C. Winking Lizard - Independence**

Mailing Address 6111 Quarry Lane

City	State	Zip Code
Independence	OH	44131

Purpose of Disbursement  
SM 12/14 - volunteer food - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		15		2014

**Transaction ID : SB30B.272844**

Amount of Each Disbursement this Period

272844	28.06
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**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

272930	270.66
273084	
272844	

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 90 OF 144

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Nazar Zhdan**

Mailing Address 211 South Fifth St

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Mileage reimbursement - GOTV - not candidate specific

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	02	/	2014

**Transaction ID : SB30B.273022**

Amount of Each Disbursement this Period

389.53
--------

**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

--

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

389.53
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38704.30
----------

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 91 OF 144

FOR LINE NUMBER:  
(check only one)
☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

party hdq - web site updates and  
improvements - not candidate specific

Mailing Address 2029K St Nw, Ste 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1762.50

Transaction ID : SD10.251764

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1762.50

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

web site updates

Mailing Address 2029K St Nw, Ste 300

City State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

2673.00

Transaction ID : SD10.253995

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**ActRight Engagement**

Nature of Debt (Purpose):

Website hosting and maintenance fees

Mailing Address 2029K St Nw, Ste 300

City

State

Zip Code

Washington

DC

20006

Outstanding Balance Beginning This Period

1575.00

Transaction ID : SD10.255424

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1575.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

6010.50

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 92 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**American Express**Nature of Debt (Purpose):  
late fees

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

1531.70

Transaction ID : SD10.259085

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1531.70

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**American Express**Nature of Debt (Purpose):  
Credit Card Bill

Mailing Address Box 0001

City State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

6345.51

Transaction ID : SD10.272464

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6345.51

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**American Express**Nature of Debt (Purpose):  
Credit Card Bill

Mailing Address Box 0001

City

State

Zip Code

Los Angeles

CA

90096-8000

Outstanding Balance Beginning This Period

50773.11

Transaction ID : SD10.272465

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50773.11

1) **SUBTOTALS** This Period This Page (optional)..... ►

58650.32

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 93 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Hdqtrs Phone**Nature of Debt (Purpose):  
party hdq phone service

Mailing Address PO Box 13148

City State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

2025.35

Transaction ID : SD10.256320

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2025.35

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Hdqtrs Phone**

Nature of Debt (Purpose):

Party dhq phone service - paid from ORP  
Restricted account - see memo text

Mailing Address PO Box 13148

City State

Zip Code

Newark

NJ

07101

Outstanding Balance Beginning This Period

-2025.35

Transaction ID : SD10.258217

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2025.35

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Office Fax**

Nature of Debt (Purpose):

election night costs - not candidate specific

Mailing Address PO Box 8100

City

State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

2673.65

Transaction ID : SD10.248880

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2673.65

1) **SUBTOTALS** This Period This Page (optional)..... ►

2673.65

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.256320

This invoice was paid from our Restricted Fund - which allows for administrative expenses payment - see corresponding negative entry on 8/16/13

Form/Schedule: SD10

Transaction ID: SD10.258217

This entry is to offset an outstanding debt dated 6/19/13 - this invoice was paid from the ORP Restricted fund - which allows for administrative expense payment

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 95 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AT&T-Office Fax**

Nature of Debt (Purpose):

Election night costs - debt paid with American Express - see memo text

Mailing Address PO Box 8100

City State

Zip Code

Aurora

IL

60507-8100

Outstanding Balance Beginning This Period

-2673.65

Transaction ID : SD10.254026

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-2673.65

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Gordon Flesch Co Inc**

Nature of Debt (Purpose):

party hdq - copy costs - not candidate specific

Mailing Address PO Box 73288

City State

Zip Code

Cleveland

OH

44193

Outstanding Balance Beginning This Period

357.52

Transaction ID : SD10.251561

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

357.52

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**King Strategic Communications**

Nature of Debt (Purpose):

printing and postage

Mailing Address 4605 Morse Road Suite 101

City

State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

22203.51

Transaction ID : SD10.259086

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22203.51

1) **SUBTOTALS** This Period This Page (optional)..... ►

19887.38

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.254026

This invoice was paid via the American Express Credit Card on 2/13/13. The debt is being transferred from AT&T to American Express, The closing date of that American Express bill will be March 8, 2013 and will be included with the debt schedule entry on the April 20th report.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 97 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**King Strategic Communications**Nature of Debt (Purpose):  
printing and postage

Mailing Address 4605 Morse Road Suite 101

City State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

30157.90

Transaction ID : SD10.259087

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

30157.90

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**King Strategic Communications**Nature of Debt (Purpose):  
Printing/Postage

Mailing Address 4605 Morse Road Suite 101

City State

Zip Code

Gahanna

OH

43230

Outstanding Balance Beginning This Period

90626.24

Transaction ID : SD10.272462

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

90626.24

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Loud & Clear Inc**Nature of Debt (Purpose):  
Election night production costs - not candidate  
specificMailing Address 2001 Dalton Ave  
Ste 201City  
CincinnatiState  
OHZip Code  
45214

Outstanding Balance Beginning This Period

20000.00

Transaction ID : SD10.248875

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

20000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

140784.14

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.248875

This invoice was not included on the original report filed 11/26/12 because the invoice was not received by the Ohio Republican Party accounting staff until 12/14/12. This invoice was paid on the American Express that was added to the Debt schedule dted 2/6/13 - therefore it is included on the debt schedule as part of the American Express and will be removed from the debt schedule

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 99 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Loud & Clear Inc**

Nature of Debt (Purpose):

Election night production - paid via American Express -see memo text

Mailing Address 2001 Dalton Ave  
Ste 201City State Zip Code  
Cincinnati OH 45214

Outstanding Balance Beginning This Period

-20000.00

Transaction ID : SD10.254025

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-20000.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising mailing -  
prospecting donors

Mailing Address 121 S Alfred St

City State Zip Code  
Alexandria VA 22314

Outstanding Balance Beginning This Period

1968.12

Transaction ID : SD10.255429

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1968.12

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party hdq operations telemarketing fundraising  
- not candidate specific

Mailing Address 121 S Alfred St

City State Zip Code  
Alexandria VA 22314

Outstanding Balance Beginning This Period

15162.00

Transaction ID : SD10.257230

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

15162.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

-2869.88

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB  
.

Form/Schedule: SD10

Transaction ID : SD10.254025

This vendor was paid via American Express on 1/24/13. This debt that was previously recorded as Loud and Clear is now included in the debt reported on this schedule as owed to American Express, dated 2/6/13.

Form/Schedule:

Transaction ID:

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 101 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

13234.20

Transaction ID : SD10.257231

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13234.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1448.16

Transaction ID : SD10.257232

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1448.16

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

895.00

Transaction ID : SD10.257233

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

895.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

15577.36

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

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FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1177.00

Transaction ID : SD10.257234

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1177.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising - telemarketing -  
not candidate specific

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1320.00

Transaction ID : SD10.257235

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1320.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising mailing -  
prospecting donors

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

13416.56

Transaction ID : SD10.258333

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

13416.56

1) **SUBTOTALS** This Period This Page (optional)..... ►

15913.56

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

**SCHEDULE D (FEC Form 3X)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 103 OF 144

FOR LINE NUMBER:  
(check only one)☐ 9  
☒ 10

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

party operations fundraising telemarketing  
prospecting donors

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

1755.00

Transaction ID : SD10.258334

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1755.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

Fundraising expenses not candidate specific  
paid from ORP Restricted account

Mailing Address 121 S Alfred St

City State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SD10.259100

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**Oxford Communications**

Nature of Debt (Purpose):

Fundraising expenses not candidate specific  
paid from ORP Restricted account

Mailing Address 121 S Alfred St

City

State

Zip Code

Alexandria

VA

22314

Outstanding Balance Beginning This Period

-10000.00

Transaction ID : SD10.259101

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

-10000.00

1) **SUBTOTALS** This Period This Page (optional)..... ►

-18245.00

2) **TOTALS** This Period (last page this line number only)..... ►

238382.03

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ..... ►

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

238382.03

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 104 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
12 / 01 / 2014

## TOTAL AMOUNT TRANSFERRED

21008.37

## BREAKDOWN OF TRANSFER RECEIVED

i) **Total Administrative** .....

21008.37

Transaction ID : H3.273112

ii) **Generic Voter Drive** .....iii) **Exempt Activities** .....iv) **Direct Fundraising** (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) **Direct Candidate Support** (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support .....

vi) **Public Communications Referring Only to Party** (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

**TOTAL** This Period (Administrative) .....**TOTAL** This Period (Generic Voter Drive) .....**TOTAL** This Period (Exempt Activities) .....**TOTAL** This Period (Direct Fundraising) .....**TOTAL** This Period (Direct Candidate Support) .....**TOTAL** This Period (Public Communications Referring Only to Party) .....**TOTAL** This Period (Total Amount Transferred) .....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 105 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &  
EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	2	/	2	0	1	4

TOTAL AMOUNT TRANSFERRED

14296.42

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

14296.42

Transaction ID : H3.273113

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 106 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M M	/	D D	/	Y Y Y Y
12	/	09	/	2014

## TOTAL AMOUNT TRANSFERRED

18000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

18000.00

Transaction ID : H3.273114

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	1	4

## TOTAL AMOUNT TRANSFERRED

15000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

15000.00

Transaction ID : H3.273115

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

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FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	4

TOTAL AMOUNT TRANSFERRED

3028.94

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

3028.94

Transaction ID : H3.273116

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 109 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	4

TOTAL AMOUNT TRANSFERRED

4082.14

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

4082.14

Transaction ID : H3.273117

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 110 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	4

TOTAL AMOUNT TRANSFERRED

18000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

18000.00

Transaction ID : H3.273118

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 111 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	7		2	0	1	4

TOTAL AMOUNT TRANSFERRED

2502.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

2502.00

Transaction ID : H3.273119

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 112 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

NAME OF ACCOUNT	DATE OF RECEIPT	TOTAL AMOUNT TRANSFERRED
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE	MM / DD / YYYY 12 / 17 / 2014	3209.43

## BREAKDOWN OF TRANSFER RECEIVED

i) <b>Total Administrative</b> .....	3209.43
<b>Transaction ID : H3.273120</b>	
ii) <b>Generic Voter Drive</b> .....	
iii) <b>Exempt Activities</b> .....	
iv) <b>Direct Fundraising</b> (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Fundraising .....	
v) <b>Direct Candidate Support</b> (List Activity or Event Identifier)	
a) .....	
b) .....	
c) Total Amount Transferred For Direct Candidate Support .....	
vi) <b>Public Communications Referring Only to Party</b> (Made by PAC) .....	

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

<b>TOTAL</b> This Period (Administrative) .....	
<b>TOTAL</b> This Period (Generic Voter Drive) .....	
<b>TOTAL</b> This Period (Exempt Activities) .....	
<b>TOTAL</b> This Period (Direct Fundraising) .....	
<b>TOTAL</b> This Period (Direct Candidate Support) .....	
<b>TOTAL</b> This Period (Public Communications Referring Only to Party) .....	
<b>TOTAL</b> This Period (Total Amount Transferred) .....	

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 113 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	2	/	2	0	1	4

## TOTAL AMOUNT TRANSFERRED

35619.07

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

35619.07

Transaction ID : H3.273121

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 114 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
 OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	9	/	2	0	1	4

## TOTAL AMOUNT TRANSFERRED

14607.17

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

14607.17

Transaction ID : H3.273122

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

TOTAL This Period (Generic Voter Drive) .....

TOTAL This Period (Exempt Activities) .....

TOTAL This Period (Direct Fundraising) .....

TOTAL This Period (Direct Candidate Support) .....

TOTAL This Period (Public Communications Referring Only to Party) .....

TOTAL This Period (Total Amount Transferred).....

**SCHEDULE H3 (FEC Form 3X)**  
**TRANSFERS FROM NONFEDERAL ACCOUNTS FOR**  
**ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

PAGE 115 OF 144

FOR LINE 18a OF FORM 3X

NAME OF COMMITTEE (In Full)  
OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE

## NAME OF ACCOUNT

OHIO REPUBLICAN PARTY STATE CENTRAL &amp; EXECUTIVE COMMITTEE

## DATE OF RECEIPT

M M / D D / Y Y Y Y Y Y  
12 / 30 / 2014

## TOTAL AMOUNT TRANSFERRED

24000.00

## BREAKDOWN OF TRANSFER RECEIVED

i) Total Administrative .....

24000.00

Transaction ID : H3.273123

ii) Generic Voter Drive .....

iii) Exempt Activities.....

iv) Direct Fundraising (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Fundraising .....

v) Direct Candidate Support (List Activity or Event Identifier)

a) .....

b) .....

c) Total Amount Transferred For Direct Candidate Support.....

vi) Public Communications Referring Only to Party (Made by PAC) .....

## TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED

TOTAL This Period (Administrative) .....

173353.54

TOTAL This Period (Generic Voter Drive) .....

0.00

TOTAL This Period (Exempt Activities) .....

0.00

TOTAL This Period (Direct Fundraising) .....

0.00

TOTAL This Period (Direct Candidate Support) .....

0.00

TOTAL This Period (Public Communications Referring Only to Party) .....

0.00

TOTAL This Period (Total Amount Transferred).....

173353.54

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

PAGE 116 OF 144

FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Staples - Olentangy</b>		<b>Transaction ID : H4.273021</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 1749 Olentangy River Rd				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Columbus		State OH	Zip Code 43212	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: KE 12/14 - office supplies - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/Type		Allocated Activity or Event Year-To-Date 2085006.30	
[MEMO ITEM]				Date <input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.67			145.44		171.11

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.272818</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville		State OH	Zip Code 43082	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fees not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/Type		Allocated Activity or Event Year-To-Date 2169959.58	
				Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.65			37.70		44.35

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.272819</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville		State OH	Zip Code 43082	<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fees not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/Type		Allocated Activity or Event Year-To-Date 2169984.58	
				Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3.75			21.25		25.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.40		58.95		69.35

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.272820</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville	State OH	Zip Code 43082		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fees not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date 2170025.43	
				Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
6.13			34.72		40.85

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.272821</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville	State OH	Zip Code 43082		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fees not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2170061.43	
				Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.40			30.60		36.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.272823</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville	State OH	Zip Code 43082		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fees not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2170081.38	
				Date <input type="text" value="12"/> / <input type="text" value="01"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.99			16.96		19.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
14.52		82.28		96.80

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>All Secured Security Services</b>			<b>Transaction ID : H4.272999</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8398								
City Columbus		State OH		Zip Code 43201				
Purpose of Disbursement: locksmith services - not candidate specific						Allocated Activity or Event Year-To-Date <div>2170149.92</div>		
Activity or Event Identifier: <b>Administrative</b>								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>10.28</div>						<div>58.26</div>		
			=			TOTAL AMOUNT		
						<div>68.54</div>		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Aqua Systems</b>			<b>Transaction ID : H4.273000</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 7785 E US Hwy 36								
City Avon		State IN		Zip Code 46123				
Purpose of Disbursement: Office supplies - not candidate specific						Allocated Activity or Event Year-To-Date <div>2170217.13</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>10.08</div>						<div>57.13</div>		
			=			TOTAL AMOUNT		
						<div>67.21</div>		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T Internet</b>			<b>Transaction ID : H4.273001</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora		State IL		Zip Code 60507-8100				
Purpose of Disbursement: Office internet service - not candidate specific						Allocated Activity or Event Year-To-Date <div>2171356.81</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>170.95</div>						<div>968.73</div>		
			=			TOTAL AMOUNT		
						<div>1139.68</div>		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>191.31</div>		<div>1084.12</div>		<div>1275.43</div>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div>		<div></div>		<div></div>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T</b>			<b>Transaction ID : H4.273002</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora	State IL	Zip Code 60507				Allocated Activity or Event Year-To-Date 2171842.04		
Purpose of Disbursement: Router rental - not candidate specific						Date 12 / 02 / 2014		
Activity or Event Identifier: <b>Administrative</b>			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
72.78				412.45			485.23	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T-Hdqtrs Phone</b>			<b>Transaction ID : H4.273003</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 13148								
City Newark	State NJ	Zip Code 07101				Allocated Activity or Event Year-To-Date 2173157.79		
Purpose of Disbursement: Office phones - not candidate specific						Date 12 / 02 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
197.36				1118.39			1315.75	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T Internet</b>			<b>Transaction ID : H4.273004</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora	State IL	Zip Code 60507-8100				Allocated Activity or Event Year-To-Date 2174315.59		
Purpose of Disbursement: Internet service - not candidate specific						Date 12 / 02 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
173.67				984.13			1157.80	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
443.81		2514.97		2958.78

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Capitol Contender</b>			<b>Transaction ID : H4.273005</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 274 S Third St								
City Columbus	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date 2174565.59		
Purpose of Disbursement: Database services - not candidate specific						Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: <b>Administrative</b>			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
37.50				212.50			250.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>City of Columbus-Utilities</b>			<b>Transaction ID : H4.273006</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 182882								
City Columbus	State OH	Zip Code 43218-2882				Allocated Activity or Event Year-To-Date 2176535.96		
Purpose of Disbursement: Headquarters electric bill - not candidate specific						Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
295.56				1674.81			1970.37	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>City of Columbus-Utilities</b>			<b>Transaction ID : H4.273007</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 182882								
City Columbus	State OH	Zip Code 43218-2882				Allocated Activity or Event Year-To-Date 2177885.45		
Purpose of Disbursement: Headquarters water bill - not candidate specific						Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
202.42				1147.07			1349.49	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
535.48		3034.38		3569.86

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>City Wide Maintenance of Columbus</b>			<b>Transaction ID : H4.273008</b>			Allocated Activity or Event:								
Mailing Address 6415 E Livingston Ave Ste E						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt								
City Reynoldsbury State OH Zip Code 43068						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support								
Purpose of Disbursement: Janitorial services - not candidate specific						<input type="checkbox"/> Public Comm (ref to party only) by PAC								
Activity or Event Identifier: <b>Administrative</b>						Allocated Activity or Event Year-To-Date 2178675.66								
Category/Type						Date 12 / 02 / 2014								
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
118.53						671.68						790.21		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Columbia Gas of Ohio</b>			<b>Transaction ID : H4.273009</b>			Allocated Activity or Event:								
Mailing Address PO Box 9001847						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt								
City Louisville State KY Zip Code 40290						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support								
Purpose of Disbursement: Natural gas bill - not candidate specific						<input type="checkbox"/> Public Comm (ref to party only) by PAC								
Activity or Event Identifier: Administrative						Allocated Activity or Event Year-To-Date 2178743.57								
Category/Type						Date 12 / 02 / 2014								
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
10.19						57.72						67.91		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>CRI Digital</b>			<b>Transaction ID : H4.273010</b>			Allocated Activity or Event:								
Mailing Address PO Box 14824						<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt								
City Columbus State OH Zip Code 43214						<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support								
Purpose of Disbursement: Copier repair - not candidate specific						<input type="checkbox"/> Public Comm (ref to party only) by PAC								
Activity or Event Identifier: Administrative						Allocated Activity or Event Year-To-Date 2179184.32								
Category/Type						Date 12 / 02 / 2014								
FEDERAL SHARE			+			NONFEDERAL SHARE			=			TOTAL AMOUNT		
66.11						374.64						440.75		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.83		1104.04		1298.87

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>E-Roots Consulting</b>		<b>Transaction ID : H4.273012</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Tech support - not candidate specific				Allocated Activity or Event Year-To-Date 2179940.32	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
113.40			642.60		756.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Electrical Service Professionals Inc</b>		<b>Transaction ID : H4.273013</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 243					
City Grove City	State OH	Zip Code 43123			
Purpose of Disbursement: Electrical repairs - not candidate specific				Allocated Activity or Event Year-To-Date 2180380.32	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.00			374.00		440.00

<b>C. Full Name (Last, First, Middle Initial)</b> <b>LexisNexis</b>		<b>Transaction ID : H4.273014</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2314					
City Carol Stream	State IL	Zip Code 60132			
Purpose of Disbursement: research access - not candidate specific				Allocated Activity or Event Year-To-Date 2180736.15	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
53.37			302.46		355.83

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
232.77		1319.06		1551.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Martin Painting &amp; Coating Co</b>			<b>Transaction ID : H4.273015</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address   Department L-1720								
City Columbus		State OH		Zip Code 43260				
Purpose of Disbursement: Building maintenance - not candidate specific					Category/ Type		Allocated Activity or Event Year-To-Date 2186215.15	
Activity or Event Identifier: <b>Administrative</b>							Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE			+		NONFEDERAL SHARE		= TOTAL AMOUNT	
821.85					4657.15		5479.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Neopost Inc.</b>			<b>Transaction ID : H4.273017</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address   PO Box 45840								
City San Francisco		State CA		Zip Code 94145-0840				
Purpose of Disbursement: equipment service - not candidate specific					Category/ Type		Allocated Activity or Event Year-To-Date 2186252.33	
Activity or Event Identifier: Administrative							Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE			+		NONFEDERAL SHARE		= TOTAL AMOUNT	
5.58					31.60		37.18	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Waste Management</b>			<b>Transaction ID : H4.273018</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address   PO Box 9001054								
City Louisville		State KY		Zip Code 40290				
Purpose of Disbursement: Headquarters waste removal - not candidate specific					Category/ Type		Allocated Activity or Event Year-To-Date 2186795.37	
Activity or Event Identifier: Administrative							Date <input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>	
FEDERAL SHARE			+		NONFEDERAL SHARE		= TOTAL AMOUNT	
81.46					461.58		543.04	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
908.89		5150.33		6059.22

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Time Warner Cable</b>		<b>Transaction ID : H4.273019</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 0916					
City Carol Stream	State IL	Zip Code 60132			
Purpose of Disbursement: Headquarters cable service - not candidate specific				Allocated Activity or Event Year-To-Date 2186900.70	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.80			89.53		105.33

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Ms. Katie Eagan</b>		<b>Transaction ID : H4.273020</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Reimbursement - see KE 12/14 - not candidate specific				Allocated Activity or Event Year-To-Date 2187071.81	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.67			145.44		171.11

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Principal Financial Group - FICA</b>		<b>Transaction ID : H4.273024</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 310389					
City Des Moines	State IA	Zip Code 50331-0389			
Purpose of Disbursement: Employer tax disabled employee - not candidate specific				Allocated Activity or Event Year-To-Date 2187254.30	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.37			155.12		182.49

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
68.84		390.09		458.93

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>United Health Care</b>		<b>Transaction ID : H4.273032</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 9200 Worthington Rd					
City Westerville	State OH	Zip Code 43082			
Purpose of Disbursement: Employee insurance premium - employees not more than 25% - not candidate specific				Allocated Activity or Event Year-To-Date 2191347.73	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
614.01			3479.42		4093.43

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Superior Dental Care</b>		<b>Transaction ID : H4.273035</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6683 Centerville Business Pkwy					
City Centerville	State OH	Zip Code 45459			
Purpose of Disbursement: Employee insurance premium - employees not more than 25% - not candidate specific				Allocated Activity or Event Year-To-Date 2192765.89	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 02 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
212.72			1205.44		1418.16

<b>C. Full Name (Last, First, Middle Initial)</b> <b>American Express</b>		<b>Transaction ID : H4.273025</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Box 0001					
City Los Angeles	State CA	Zip Code 90096-8000			
Purpose of Disbursement: credit card processing fee - not candidate specific				Allocated Activity or Event Year-To-Date 2192773.84	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 04 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
1.19			6.76		7.95

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
827.92		4691.62		5519.54

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr Robert T. Bennett</b>			<b>Transaction ID : H4.272770</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 636 S Grant Ave								
City Columbus	State OH	Zip Code 43206-1219				Allocated Activity or Event Year-To-Date 2197961.84		
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Date 12 / 05 / 2014		
Activity or Event Identifier: <b>Administrative</b>			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
778.20				4409.80			5188.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Mr. Kevin P. Bingle</b>			<b>Transaction ID : H4.272771</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 408 E Schreyer Pl								
City Columbus	State OH	Zip Code 43214-2214				Allocated Activity or Event Year-To-Date 2199833.17		
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Date 12 / 05 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
280.70				1590.63			1871.33	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew J. Borges</b>			<b>Transaction ID : H4.272772</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address % ORP 211 S 5th St								
City Columbus	State OH	Zip Code 43215				Allocated Activity or Event Year-To-Date 2206480.96		
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Date 12 / 05 / 2014		
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
997.17				5650.62			6647.79	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2056.07		11651.05		13707.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Thomas Dains Jr</b>		<b>Transaction ID : H4.272773</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific				Allocated Activity or Event Year-To-Date 2208061.91	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
237.14			1343.81		1580.95

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Ms. Katie Eagan</b>		<b>Transaction ID : H4.272774</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific				Allocated Activity or Event Year-To-Date 2211431.83	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
505.49			2864.43		3369.92

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mrs. Sally Hauser</b>		<b>Transaction ID : H4.272775</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 211 South Fifth Street					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific				Allocated Activity or Event Year-To-Date 2212516.51	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 05 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
162.70			921.98		1084.68

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
905.33		5130.22		6035.55

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Jacquelyn Reineke</b>			<b>Transaction ID : H4.272776</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 S. 5th St.								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2213776.81		
Activity or Event Identifier: <b>Administrative</b>						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
189.04						1071.26		
						= TOTAL AMOUNT		
						1260.30		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Chris Schrimpf</b>			<b>Transaction ID : H4.272777</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address % ORP 211 S 5th St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2218797.24		
Activity or Event Identifier: Administrative						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
753.06						4267.37		
						= TOTAL AMOUNT		
						5020.43		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Julia Smythe</b>			<b>Transaction ID : H4.272778</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address % OH Republican Party, 211 S 5th S								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2220358.59		
Activity or Event Identifier: Administrative						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
234.20						1327.15		
						= TOTAL AMOUNT		
						1561.35		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1176.30		6665.78		7842.08

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Susan Waidner</b>			<b>Transaction ID : H4.272779</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address %OH Republican Party, 211 S 5th St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2223495.16		
Activity or Event Identifier: <b>Administrative</b>						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
470.49						2666.08		
						= TOTAL AMOUNT		
						3136.57		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Sheryl Warner</b>			<b>Transaction ID : H4.272780</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 S. Fifth St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2228079.77		
Activity or Event Identifier: Administrative						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
687.69						3896.92		
						= TOTAL AMOUNT		
						4584.61		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. William Wyrick</b>			<b>Transaction ID : H4.272781</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address % Ohio Republican Party 211 S Fifth St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes and fees - not candidate specific						Allocated Activity or Event Year-To-Date 2229433.24		
Activity or Event Identifier: Administrative						Date <input type="text" value="12"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
203.02						1150.45		
						= TOTAL AMOUNT		
						1353.47		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1361.20		7713.45		9074.65

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>FactGem</b>		<b>Transaction ID : H4.273051</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2000 Auburn Dr., Suite 330					
City Beachwood	State OH	Zip Code 44122			
Purpose of Disbursement: Software costs - not candidate specific				Allocated Activity or Event Year-To-Date 2254433.24	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
3750.00			21250.00		25000.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>		<b>Transaction ID : H4.273052</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7704 Leesburg Pike, Ste 1					
City Falls Church	State VA	Zip Code 22043-2625			
Purpose of Disbursement: Online fee - not candidate specific				Allocated Activity or Event Year-To-Date 2254438.39	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 09 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.77			4.38		5.15

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.273053</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 440 Polaris Parkway 4th Fl					
City Westerville	State OH	Zip Code 43082			
Purpose of Disbursement: Bank fee - not candidate specific				Allocated Activity or Event Year-To-Date 2254444.37	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 15 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
0.90			5.08		5.98

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
3751.67		21259.46		25011.13

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.273054</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville State OH Zip Code 43082				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fee - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date 2254459.37	
Date		12 / 15 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
2.25				12.75	
		=		TOTAL AMOUNT	
				15.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>		<b>Transaction ID : H4.273055</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 7704 Leesburg Pike, Ste 1				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Falls Church State VA Zip Code 22043-2625				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Software fee - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2255409.37	
Date		12 / 15 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
142.50				807.50	
		=		TOTAL AMOUNT	
				950.00	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.273056</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville State OH Zip Code 43082				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fee - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2255411.87	
Date		12 / 15 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
0.38				2.12	
		=		TOTAL AMOUNT	
				2.50	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
145.13		822.37		967.50

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.273057</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville State OH Zip Code 43082				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank fee - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Allocated Activity or Event Year-To-Date 2255462.87	
Date		12 / 15 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
7.65				43.35	
		=		TOTAL AMOUNT	
				51.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Huntington National Bank</b>		<b>Transaction ID : H4.279237</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 440 Polaris Parkway 4th Fl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Westerville State OH Zip Code 43082				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Bank Fees - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2255577.28	
Date		12 / 15 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
41.19				73.22	
		=		TOTAL AMOUNT	
				114.41	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Mr. Kevin P. Bingle</b>		<b>Transaction ID : H4.272798</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 408 E Schreyer Pl				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Columbus State OH Zip Code 43214-2214				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Activity or Event Identifier: Administrative		Category/ Type		Allocated Activity or Event Year-To-Date 2257449.03	
Date		12 / 19 / 2014			
FEDERAL SHARE		+		NONFEDERAL SHARE	
280.76				1590.99	
		=		TOTAL AMOUNT	
				1871.75	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
329.60		1707.56		2037.16

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. Matthew J. Borges</b>		<b>Transaction ID : H4.272799</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2264097.24	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
997.23			5650.98		6648.21

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Thomas Dains Jr</b>		<b>Transaction ID : H4.272800</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % OH Republican Party 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2265678.62	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
237.21			1344.17		1581.38

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Ms. Katie Eagan</b>		<b>Transaction ID : H4.272801</b>		<b>Allocated Activity or Event:</b> <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % ORP 211 S 5th St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2269036.00	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 19 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
503.61			2853.77		3357.38

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1738.05		9848.92		11586.97

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mrs. Sally Hauser</b>		<b>Transaction ID : H4.272802</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 211 South Fifth Street				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43215		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2270121.11	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
162.77			922.34		1085.11

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Jacquelyn Reineke</b>		<b>Transaction ID : H4.272803</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 211 S. 5th St.				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43215		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2271381.84	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
189.11			1071.62		1260.73

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Chris Schrimpf</b>		<b>Transaction ID : H4.272804</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address % ORP 211 S 5th St				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43215		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific				Allocated Activity or Event Year-To-Date 2276389.75	
Activity or Event Identifier: Administrative		Category/ Type		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
751.19			4256.72		5007.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1103.07		6250.68		7353.75

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Julia Smythe</b>			<b>Transaction ID : H4.272805</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address % OH Republican Party, 211 S 5th S								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific						Allocated Activity or Event Year-To-Date 2277947.14		
Activity or Event Identifier: <b>Administrative</b>								
						Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
233.61						1323.78		
						= TOTAL AMOUNT		
						1557.39		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Susan Waidner</b>			<b>Transaction ID : H4.272806</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address %OH Republican Party, 211 S 5th St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific						Allocated Activity or Event Year-To-Date 2281079.76		
Activity or Event Identifier: Administrative								
						Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
469.89						2662.73		
						= TOTAL AMOUNT		
						3132.62		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Sheryl Warner</b>			<b>Transaction ID : H4.272807</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 211 S. Fifth St								
City Columbus		State OH		Zip Code 43215				
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific						Allocated Activity or Event Year-To-Date 2285660.41		
Activity or Event Identifier: Administrative								
						Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>		
FEDERAL SHARE			+			NONFEDERAL SHARE		
687.10						3893.55		
						= TOTAL AMOUNT		
						4580.65		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1390.60		7880.06		9270.66

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Mr. William Wyrick</b>		<b>Transaction ID : H4.272808</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address % Ohio Republican Party 211 S Fifth St				Allocated Activity or Event Year-To-Date 2287009.87	
City Columbus	State OH	Zip Code 43215		Date <input type="text" value="12"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Payroll, taxes, fees - not candidate specific		<input type="text"/>			
Activity or Event Identifier: <b>Administrative</b>		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="202.42"/>			<input type="text" value="1147.04"/>		<input type="text" value="1349.46"/>

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Aqua Systems</b>		<b>Transaction ID : H4.273058</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7785 E US Hwy 36				Allocated Activity or Event Year-To-Date 2287050.41	
City Avon	State IN	Zip Code 46123		Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Office supplies - not candidate specific		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="6.08"/>			<input type="text" value="34.46"/>		<input type="text" value="40.54"/>

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Arena Communications</b>		<b>Transaction ID : H4.273059</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1780 Sequoia Vista Circle				Allocated Activity or Event Year-To-Date 2287964.41	
City Salt Lake City	State UT	Zip Code 84104		Date <input type="text" value="12"/> / <input type="text" value="22"/> / <input type="text" value="2014"/>	
Purpose of Disbursement: Web site support - not candidate specific		<input type="text"/>			
Activity or Event Identifier: Administrative		Category/ Type			
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="137.10"/>			<input type="text" value="776.90"/>		<input type="text" value="914.00"/>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="345.60"/>		<input type="text" value="1958.40"/>		<input type="text" value="2304.00"/>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T-Office Fax</b>			<b>Transaction ID : H4.273060</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora		State IL		Zip Code 60507-8100				
Purpose of Disbursement: Office fax machine - not candidate specific						Allocated Activity or Event Year-To-Date <div>2288297.61</div>		
Activity or Event Identifier: <b>Administrative</b>								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>49.98</div>						<div>283.22</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>333.20</div>		

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T Internet</b>			<b>Transaction ID : H4.273061</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora		State IL		Zip Code 60507-8100				
Purpose of Disbursement: Office internet service - not candidate specific						Allocated Activity or Event Year-To-Date <div>2289437.29</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>170.95</div>						<div>968.73</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>1139.68</div>		

<b>C. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T</b>			<b>Transaction ID : H4.273062</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 8100								
City Aurora		State IL		Zip Code 60507				
Purpose of Disbursement: Router rental - not candidate specific						Allocated Activity or Event Year-To-Date <div>2289922.52</div>		
Activity or Event Identifier: Administrative								
FEDERAL SHARE			+			NONFEDERAL SHARE		
<div>72.78</div>						<div>412.45</div>		
			=			TOTAL AMOUNT		
<div></div>						<div>485.23</div>		

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div>293.71</div>		<div>1664.40</div>		<div>1958.11</div>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT
<div></div>		<div></div>		<div></div>

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T-Hdqtrs Phone</b>		<b>Transaction ID : H4.273063</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 13148					
City Newark	State NJ	Zip Code 07101			
Purpose of Disbursement: Office phones - not candidate specific				Allocated Activity or Event Year-To-Date 2291232.55	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
196.50			1113.53		1310.03

<b>B. Full Name (Last, First, Middle Initial)</b> <b>AT&amp;T Internet</b>		<b>Transaction ID : H4.273064</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 8100					
City Aurora	State IL	Zip Code 60507-8100			
Purpose of Disbursement: Office internet access - not candidate specific				Allocated Activity or Event Year-To-Date 2292390.35	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
173.67			984.13		1157.80

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Capitol Contender</b>		<b>Transaction ID : H4.273065</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 274 S Third St					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Database support - not candidate specific				Allocated Activity or Event Year-To-Date 2292640.35	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
37.50			212.50		250.00

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
407.67		2310.16		2717.83

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>City of Columbus-Utilities</b>		<b>Transaction ID : H4.273066</b>		<b>Allocated Activity or Event:</b>	
Mailing Address PO Box 182882				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Columbus		State OH		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 43218-2882				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office utilities - not candidate specific				Allocated Activity or Event Year-To-Date 2294260.10	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
242.96				1376.79	
		=		TOTAL AMOUNT	
				1619.75	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>City Wide Maintenance of Columbus</b>		<b>Transaction ID : H4.273067</b>		<b>Allocated Activity or Event:</b>	
Mailing Address 6415 E Livingston Ave Ste E				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Reynoldsburg		State OH		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 43068				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Janitorial services - not candidate specific				Allocated Activity or Event Year-To-Date 2295050.31	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
118.53				671.68	
		=		TOTAL AMOUNT	
				790.21	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Columbia Gas of Ohio</b>		<b>Transaction ID : H4.273068</b>		<b>Allocated Activity or Event:</b>	
Mailing Address PO Box 9001847				<input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
City Louisville		State KY		<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
Zip Code 40290				<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office utilities - not candidate specific				Allocated Activity or Event Year-To-Date 2295439.52	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+		NONFEDERAL SHARE	
58.38				330.83	
		=		TOTAL AMOUNT	
				389.21	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
419.87		2379.30		2799.17

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Columbus City Treasurer - Licensure Section</b>			<b>Transaction ID : H4.273069</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 750 Piedmont Rd						Allocated Activity or Event Year-To-Date 2295939.52		
City Columbus	State OH	Zip Code 43215				Date 12 / 22 / 2014		
Purpose of Disbursement: Security license - not candidate specific								
Activity or Event Identifier: <b>Administrative</b>			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
75.00				425.00			500.00	

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Double Diamond</b>			<b>Transaction ID : H4.273070</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 504 Cherrybottom Road						Allocated Activity or Event Year-To-Date 2296331.73		
City Gahanna	State OH	Zip Code 43230				Date 12 / 22 / 2014		
Purpose of Disbursement: Snow removal - not candidate specific								
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
58.83				333.38			392.21	

<b>C. Full Name (Last, First, Middle Initial)</b> <b>E-Roots Consulting</b>			<b>Transaction ID : H4.273071</b>			Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 274 S Third						Allocated Activity or Event Year-To-Date 2296840.98		
City Columbus	State OH	Zip Code 43215				Date 12 / 22 / 2014		
Purpose of Disbursement: Tech support - not candidate specific								
Activity or Event Identifier: Administrative			Category/ Type					
FEDERAL SHARE			+	NONFEDERAL SHARE		=	TOTAL AMOUNT	
76.39				432.86			509.25	

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.22		1191.24		1401.46

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Fire Systems Professionals</b>		<b>Transaction ID : H4.273072</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 243					
City Grove City	State OH	Zip Code 43123			
Purpose of Disbursement: Security system monitoring - not candidate specific				Allocated Activity or Event Year-To-Date 2296894.98	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
8.10			45.90		54.00

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Gordon Flesch Co Inc</b>		<b>Transaction ID : H4.273073</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 73288					
City Cleveland	State OH	Zip Code 44193			
Purpose of Disbursement: Office Equipment Lease - not candidate specific				Allocated Activity or Event Year-To-Date 2298420.36	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
228.81			1296.57		1525.38

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Hanover Insurance Company</b>		<b>Transaction ID : H4.273074</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 4031					
City Wobiren	State MA	Zip Code 01888			
Purpose of Disbursement: Liability Insurance - not candidate specific				Allocated Activity or Event Year-To-Date 2302226.86	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
570.98			3235.52		3806.50

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
807.89		4577.99		5385.88

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>LexisNexis</b>		<b>Transaction ID : H4.273075</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 2314					
City Carol Stream	State IL	Zip Code 60132			
Purpose of Disbursement: Subscription cost - not candidate specific				Allocated Activity or Event Year-To-Date 2302582.68	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
53.37			302.45		355.82

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Orkin Pest Control</b>		<b>Transaction ID : H4.273076</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6232 Huntley Road					
City Columbus	State OH	Zip Code 43229			
Purpose of Disbursement: Exterminator services - not candidate specific				Allocated Activity or Event Year-To-Date 2302810.58	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
34.19			193.71		227.90

<b>C. Full Name (Last, First, Middle Initial)</b> <b>The Printed Image</b>		<b>Transaction ID : H4.273077</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 41 South Grant Street					
City Columbus	State OH	Zip Code 43215			
Purpose of Disbursement: Lanyards - not candidate specific				Allocated Activity or Event Year-To-Date 2303049.98	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE		= TOTAL AMOUNT
35.91			203.49		239.40

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
123.47		699.65		823.12

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>Thomas Door</b>		<b>Transaction ID : H4.273078</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address 4196 Indianola Ave				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Columbus	State OH	Zip Code 43215		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Door Repair - not candidate specific				Allocated Activity or Event Year-To-Date 2303543.53	
Activity or Event Identifier: <b>Administrative</b>		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
74.03			419.52		493.55

<b>B. Full Name (Last, First, Middle Initial)</b> <b>Time Warner Cable</b>		<b>Transaction ID : H4.273080</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 0916				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Carol Stream	State IL	Zip Code 60132		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Office cable service - not candidate specific				Allocated Activity or Event Year-To-Date 2303648.86	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
15.80			89.53		105.33

<b>C. Full Name (Last, First, Middle Initial)</b> <b>Waste Management</b>		<b>Transaction ID : H4.273081</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt	
Mailing Address PO Box 9001054				<input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support	
City Louisville	State KY	Zip Code 40290		<input type="checkbox"/> Public Comm (ref to party only) by PAC	
Purpose of Disbursement: Trash Removal - not candidate specific				Allocated Activity or Event Year-To-Date 2304194.77	
Activity or Event Identifier: Administrative		Category/ Type		Date 12 / 22 / 2014	
FEDERAL SHARE		+	NONFEDERAL SHARE	=	TOTAL AMOUNT
81.89			464.02		545.91

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
171.72		973.07		1144.79

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)****DISBURSEMENTS FOR ALLOCATED  
FEDERAL/NONFEDERAL ACTIVITY**

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FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

**OHIO REPUBLICAN PARTY STATE CENTRAL & EXECUTIVE COMMITTEE**

<b>A. Full Name (Last, First, Middle Initial)</b> <b>CMDI</b>			<b>Transaction ID : H4.273082</b>		Allocated Activity or Event: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 7704 Leesburg Pike, Ste 1						
City Falls Church	State VA	Zip Code 22043-2625				
Purpose of Disbursement: Onlinee access fee - not candidate specific			<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto; text-align: right;">2304205.61</div>	
Activity or Event Identifier: <b>Administrative</b>					Date <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y 12 23 2014</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">1.63</div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">9.21</div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">10.84</div>

<b>B. Full Name (Last, First, Middle Initial)</b>					Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address						
City	State	Zip Code				
Purpose of Disbursement:			<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
Activity or Event Identifier:					Date <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>

<b>C. Full Name (Last, First, Middle Initial)</b>					Allocated Activity or Event: <input type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address						
City	State	Zip Code				
Purpose of Disbursement:			<div style="border: 1px solid black; width: 50px; height: 20px; margin: 0 auto;"></div> Category/ Type		Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 150px; height: 20px; margin: 0 auto;"></div>	
Activity or Event Identifier:					Date <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y Y Y</div> </div>	
FEDERAL SHARE		+	NONFEDERAL SHARE		=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>			<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto;"></div>

**SUBTOTAL** of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">1.63</div>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">9.21</div>		<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">10.84</div>

**TOTAL** This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">20167.57</div>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">114122.81</div>	<div style="border: 1px solid black; width: 100px; height: 20px; margin: 0 auto; text-align: right;">134290.38</div>